

GUIDELINES

CALIFORNIA SCHOOL AGE FAMILIES EDUCATION (CAL-SAFE) PROGRAM 2003 REPORT OF THE ANNUAL REVIEW OF THE COUNTY SERVICE COORDINATION PLAN

Date: ____/____/____

Authorized Signature: _____

County: _____

Title: _____

SUBMIT THIS PAGE WITH YOUR 2003 REPORT OF THE CSCP ANNUAL REVIEW

DUE DATE: October 31, 2003

IF QUESTIONS, CONTACT THE CAL-SAFE PROGRAM OFFICE AT 916-319-0917.

- 1. Describe the process for reviewing your county's CSCP.** (Limit response to one page.)
- 2. What did you learn from the annual review? Identify any updated or modified components if changes are made to the 2002 Report of the CSCP Annual Review.** (Limit response to one page.)
- 3. Attach documentation of agencies and/or programs participating in the review. Refer to cover letter for agencies required to participate.** (Include list of agencies/programs participating in the review, meeting sign-in sheet(s), telephone log(s), email(s), or other similar records.)
- 4. Submit the original and one copy of the completed 2003 Report of the CSCP Annual Review by October 31, 2003, to the following address:**

Cal-SAFE Program: CSCP Annual Review
Youth Education Partnerships Office
California Department of Education
1430 N Street, Suite 6408
Sacramento, CA 95814